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WONG, CABELLO, LUTSCH, RUTHERFORD & BRUCCULERI, L.L.P. 20333 SH 249 SRUTE 600

July 11, 2003

SMALL ENTITY

HOUSTON, TX 77070

10/618,500

APPLN TYPE

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| | | | 1/16/09 | | (Date) |
| | | | | | |
| APPLICATION NO. | FILING DATE | FIRST NAMED INVEN | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |

Christophe Y. Blaicher

PUBLICATION FEE

TITLE OF INVENTION: REORGANIZING DATABASE OBJECTS USING VARIABLE LENGTH KEYS

ISSUE FEE

| nonprovisional | NO | \$1510 | \$ | 300 | \$1810 | | 01/16/2009 | | |
|---|--|--|---|--|------------------------------------|---|---|--|--|
| EXAMINER | | ART UNIT | CLASS- | CLASS-SUBCLASS | | | | | |
| SADEE, USMAAN | ADEE, USMAAN 216 | | 36 707-007000 | | - | | | | |
| 1. Change of correspondence address or indication of "Fee Address" (CFR 1363). Change of correspondence address (or Change of Corresponde Address from PTOSB 122) attached. "Fee Address" indication (or "Fee Address" Indication form PTOSB 47, Rev 03-02 or nore recent) attached. Use of a Custon Number is 'required. | | respondence | 2 For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printing. | | | 1 Wong, Cabello, Lutsch, Rutherford & Brucculeri, L.L.P. | | | |
| ASSIGNEE NAME AND RI PLEASE NOTE: Unless an recordation as set forth in 37 (A) NAME OF ASSIGNEE | assignee is identified below | , no assignee data his form is NOT a | will appear on the par | ent. If an assignment. | | ed below, the d | ocument has been filed for | | |
| BMC Software, Inc. | | Houston, TX | | | | | | | |
| Please check the appropriate as- | signee category or categories | (will not be printe | d on the patent): | Individual 🛭 C | orporation or | other private gr | oup entity Government | | |
| 4a. The following fee(s) are enc | :losed: | 4b. Pa | yment of Fee(s): | | | | | | |
| ☑ Issue Fee | | | A check in the amount | of the fee(s) is en | nclosed. | | | | |
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| Advance Order - # of Co | pies | ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501922 (149-0105US). | | | | | | | |
| Change in Entity Status (from a. Applicant claims SMA) | | FR 1.27. | b. Applicant is no long | er claiming SMA | LL ENTITY | tatus. See 37 C | FR 1.27(g)(2). | | |
| The Director of the USPTO is r NOTE: The Issue Fee and Publi interest as shown by the records | equested to apply the Issue F ication Fee (if required) will s of the United States Patent | ee and Publication not be accepted fro and Trademark Off | Fee (if any) or to re-app om anyone other than th ice. | nly any previousle applicant; a reg | y paid issue fo istered attorno | e to the applica y or agent; or ti | tion identified above, ne assignee or other party in | | |

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